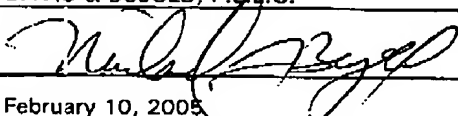
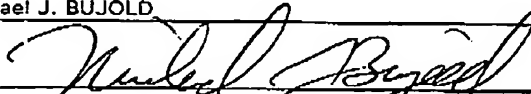


PTO/SB/21 (12-97)

Approved for use through 9/30/00. OMB 0651-0031

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/688,336	RECEIVED CENTRAL FAX CENTER FEB 10 2005
	Filing Date	October 17, 2003	
	First Named Inventor	Karlheinz MAYR and Thilo SCHMIDT	
	Group Art Unit	2832	
	Examiner Name	Lincoln D. DONOVAN	Fax: (703) 872-9306
Total No. of Pages in this Submission: 9	Attorney Docket Number	ZAHFRI P553US	
ENCLOSURES (check all that apply)			
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee attached <input checked="" type="checkbox"/> Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Part/s Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> To Convert a Provisional Petition <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Additional Enclosure(s) (please identify below):	
REMARKS			
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm or Individual Name	Michael J. BUJOLD DAVIS & BUJOLD, P.L.L.C.		
Signature			
Date	February 10, 2005		
CERTIFICATE OF TRANSMISSION			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO on February 10, 2005			
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2/10/05

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of : Karlheinz MAYR and Thilo SCHMIDT
Serial no. : 10/688,336
Filed : October 17, 2003
For : PROPORTIONAL PRESSURE CONTROL
VALVE FOR CONTROLLING THE PRESSURE
LEVEL IN A HYDRAULIC CIRCUIT
Group Art Unit : 2832
Examiner : Lincoln D. Donovan
Docket : ZAHFRI P553US

The Commissioner for Patents
U.S. Patent & Trademark Office
P. O. Box 1450
Alexandria, VA 22313-1450

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RESPONSE

Dear Sir:

[XXX] NO FEES ARE PAYABLE WITH RESPECT TO THIS RESPONSE.

In response to the official action mailed November 10, 2004, please enter the following before reconsideration of this application.

In the Specification:

Please amend paragraph [008] of the specification as follows in which the specification additions are shown by underlining and the specification deletions are shown by strikeout. Please enter the replacement specification paragraphs into the record of this case.

In the Claims:

Please amend claims 8, 9, 11, 12, 13 and 14 as follows in which the claim additions are shown by underlining and/or the claim deletions are shown by strikeout or brackets. Please enter the amended claims into the record of this case.